IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT APPLICATION OF:

Applicant:	**Katsuyuki KANEKO et al.**	)	
Serial No.	**To Be Assigned**	)	Group Art Unit: **To Be Assigned**
Filing Date:	**March 12, 2002**	)	Examiner: **To Be Assigned**
For:	**Gel Composition and Nail Enamel**	)	Customer No. *26694* 26694 PATENT TRADEMARK OFFICE
Atty. Docket No.	**36427-178647**	)	

March 12, 2002

Assistant Commissioner for Patents
& Trademarks
Washington, D.C. 20031
BOX: EXAMINING GROUP

PRELIMINARY AMENDMENT

Sir:

Kindly please amend the above referenced application as follows:

IN THE CLAIMS:

Please amend claims 4-10 as follows:

Claim 4. (Once Amended). The gel composition according to claim 1, wherein R^1 is benzyl group.

Claim 5. (Once Amended). The gel composition according to claim 1, wherein R^1 is methyl group.

Claim 6. (Once Amended). The gel composition according to claim 1, wherein R^2 is a C_{16-18} alkyl group.

Claim 7. (Once Amended). The gel composition according to claim 1, wherein each of R^3 and R^4 is a C_{16-18} group.

Claim 8. (Once Amended). The gel composition according to claim 1, wherein a host clay mineral of said cation-modified clay mineral is montmorillonite or hectorite.

Claim 9. (Once Amended). The gel composition according to claim 1, wherein the host clay mineral of said cation-modified clay mineral is montmorillonite.

Claim 10. (Once Amended). A nail enamel comprising the gel composition according to claim 1.

REMARKS

The above amendments are made to convert the multiple-dependent claims to simple dependent claims in accordance with the patent practice in the United States. No new matter has been introduced.

In view of the foregoing, it is respectfully submitted that the application is now in condition for examination, and early action in accordance thereof is requested. In the event there is any reason why the application cannot be allowed in this current condition, it is respectfully requested that the Examiner contact the undersigned at the number listed below to resolve any problems by Interview or Examiner's Amendment.

Attached hereto is a marked-up version of the changes made to the specification and claims by the current amendment. The attached page is captioned "**Version with markings to show changes made.**"

No fee is believed to be due for this amendment. Should any fee be required, please charge the same to deposit account number 22-0261 and notify the applicants' attorney.

Respectfully submitted,

Fei-Fei Chao

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Date: March 12, 2002

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VERSION WITH MARKINGS TO SHOW CHANGES MADE

IN THE CLAIMS:

Claims 4-10 have been amended as follows:

Claim 4. (Once Amended). The gel composition according to claim 1 ~~any Claims 1 to 3~~, wherein R^1 is benzyl group.

or its salts thereof.

Claim 5. (Once Amended). The gel composition according to claim 1 ~~any of Claims 1 to 3~~, wherein R^1 is methyl group.

Claim 6. (Once Amended). The gel composition according to claim 1 ~~any of Claims 1 to 5~~, wherein R^2 is a C_{16-18} alkyl group.

Claim 7. (Once Amended). The gel composition according to claim 1 ~~any of Claims 1 to 6~~, wherein each of R^3 and R^4 is a C_{16-18} group.

Claim 8. (Once Amended). The gel composition according to claim 1 ~~any of Claims 1 to 7~~, wherein a host clay mineral of said cation-modified clay mineral is montmorillonite or hectorite.

Claim 9. (Once Amended). The gel composition according to claim 1 ~~any of Claims 1 to 8~~, wherein the host clay mineral of said cation-modified clay mineral is montmorillonite.

Claim 10. (Once Amended). A nail enamel comprising the gel composition according to claim 1 ~~any of Claims 1 to 9~~.

Q: Dr. Young, you state in your report that ciprofloxacin has unexpected "extremely low toxicity." What do you mean by "extremely low toxicity"?

[He could be referring to the frequency of toxic reactions. The frequency is low with ciprofloxacin, but you should push him on what he means by "extremely." The incidence of gastrointestinal side effevts is as high as 10 per cent.

More important, however, the nature of the toxicity, no matter how infrequent, is extremely important.]

Q: Is it true that arthropathy has been associated with ciprofloxacin therapy?

Q: Would that come under the classification of "extremely low toxicity"?

Q: Do you know of any other antibiotics other than fluoroquinolones that cause arthropathy? [None reported.]

Q: Is it true that tendon rupture has been associated with ciprofloxacin therapy?

Q: Would that come under the classification of "extremely low toxicity"?

Q: Do you know of any other antibiotics other than fluoroquinolones that cause tendon rupture? [None reported.]

Q: Has ciprofloxacin been associated with vasculitis? [Yes]

Q: Would that come under the classification of "extremely low toxicity"?

Q: Has ciprofloxacin been associated with an increase in toxic reactions to the anti-asthmatic drug, theophylline? [Yes]

Q: Would that come under the classification of "extremely low toxicity"?

Q: Has ciprofloxacin been associated with an increase in toxic reactions to the anticoagulant drug, warfarin? [Yes]

Q: Are you aware that the action of ciprofloxacin to increase adverse reactions to theophylline and warfarin is due to its blocking of the metabolism of these drugs by the liver thereby causing an unexpected increase in blood level?

If he needs help, cipro inhibits the 1A2 isozyme of cytochrome P450 (pronounced "P four fifty"). There are other drugs that are metabolized by this enzyme and therefore could result in unexpected increased blood levels. These include the cardiac drugs propranalol and verapamil. Ask him if he exercises care in avoiding the potential interaction of cipro with the metabolism of other drugs.